

Docket No. 00862.022515.

SUSUMU IGARASHI ET AL.

Appln. No.: 10/073,112

Examiner: D. Dang

Filed: February 12, 2002

Art Unit: 2627

For: IMAGE CODER/DECODER, IMAGE

CODING/DECODING METHOD, AND STORAGE

MEDIUM Date: May 1, 2006

Mail Stop RCE
The Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is a Preliminary Amendment in the above-identified application.

X No additional fee is required.

The fee has been calculated as shown below

| | | | CLAIMS AS AM | ENDED | | |
|------------------|--------------------------------------|-------|--|-------------------------|------------------|-------------------|
| | (2) CLAIMS REMAINING AFTER AMENDMENT | | (4) HIGHEST NO. PREVIOUSLY PAID FOR | (5) PRESENT EXTRA | RATE | ADDITIONAL FEE |
| TOTAL CLAIMS | * | MINUS | ** 26 | = 0 | x \$25 \$50 | \$0.00 |
| INDEP. CLAIMS | * 3 | MINUS | *** | = 0 | x \$100 \$200 | \$0.00 |
| Fee for Mu | \$0.00 | | | | | |
| | \$0.00 | | | | | |

- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

| | °Verified Statement claiming small entity status is enclosed, if not filed previously. |
|---|--|
| | A check in the amount of \$ is enclosed. |
| | Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed. |
| X | Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06 1205 is hereby revoked. The Patent and Trademark Office is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed. |
| | A check in the amount of \$ to cover the Extension fee for response with amonth extension is enclosed. |
| | A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed. |
| X | Applicants' undersigned attorney may be reached in our New York Office by telephone at (212) 218-2100 or by facsimile at (212) 218-2200. All correspondence should continue to be directed to our address given below. |
| | $M \leftarrow 0$ |

Raymond A. DiPerna Attorney for Applicants Reg. No.: 44,063

FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza
New York, New York 10132-3801



PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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| : | Examiner: D. Dang |
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PRELIMINARY AMENDMENT

Sir:

A Notice of Allowance was mailed in the above-identified application on February 1, 2006. In lieu of paying the Issue and Publication Fees at this time, a Request for Continued Examination (RCE) has been filed concurrently herewith. Prior to continued examination on merits, please further amend the above-identified application as follows.

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| (Name of Attorney for Applicants) | | | | | |
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| May 1, 2006 | | | | | |
| Date of Signature | | | | | |
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